09/890641

c'd PCT/PTO

Please type a plus sign (+) inside this box

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application

Address to:

Assistant Commissioner for Patents Washington, D.C. 20231

Application Number	
Filing Date	Herewith
First Named Inventor	BUSROPAN
Group Art Unit	
Examiner Name	
Attorney Docket Number	01443/LH

Please change the Correto: X Customer Nu	espondence Address for the above-id Imber 01933 — Type Customer Number here	lentified	d application		01933 TRADEMARK OFFICE	
Firm or Individual Name					:	
Address						
Address			1			
City		State		ZIP		
Country			<u> </u>			
Telephone		F	ax			
This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor. Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). X Attorney or Agent of record. Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number						
Typed or Printed Name Leonard Holtz Reg. No. 22,974						
Signature	2/					
Date July 31 2001						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
Total of forms are submitted.						